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NEWS	6	FEB 16	New FASTA Display Formats Added to USGENE and PCTGEN
NEWS	7	FEB 16	INPADOCDB and INPAFAMDB Enriched with New Content and Features
NEWS	8	FEB 16	INSPEC Adding Its Own IPC codes and Author's E-mail Addresses
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NEWS	10	APR 02	PATDPAFULL: Application and priority number formats enhanced
NEWS	11	APR 02	DWPI: New display format ALLSTR available
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NEWS	13	APR 02	EMBASE Adds Unique Records from MEDLINE, Expanding Coverage back to 1948
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ENTRY	SESSION
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=> s raloxifene
L1 22 RALOXIFENE

=> file caplus
COST IN U.S. DOLLARS

SINCE FILE	TOTAL
ENTRY	SESSION
5.99	6.21

FULL ESTIMATED COST

FILE 'CAPLUS' ENTERED AT 14:42:55 ON 04 MAY 2010
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FILE LAST UPDATED: 3 May 2010 (20100503/ED)
REVISED CLASS FIELDS (/NCL) LAST RELOADED: Feb 2010
USPTO MANUAL OF CLASSIFICATIONS THESAURUS ISSUE DATE: Feb 2010

CAPLUS now includes complete International Patent Classification (IPC)

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<http://www.cas.org/legal/infopolicy.html>

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```
=> s l1
L2      2666 L1

=> s l2 and post-menopausal
      310679 POST
      3723 POSTS
      313212 POST
          (POST OR POSTS)
      7549 MENOPAUSAL
          3 MENOPAUSALS
      7550 MENOPAUSAL
          (MENOPAUSAL OR MENOPAUSALS)
      2224 POST-MENOPAUSAL
          (POST(W) MENOPAUSAL)
L3      78 L2 AND POST-MENOPAUSAL

=> s l3 and (60) (A) (mg)
      1394691 60
      1624369 MG
          1852 MGS
      1625641 MG
          (MG OR MGS)
      24085 (60) (A) (MG)
L4      19 L3 AND (60) (A) (MG)

=> dup rem l4
PROCESSING COMPLETED FOR L4
L5      19 DUP REM L4 (0 DUPLICATES REMOVED)

=> s l5 and ad<19961030
L6      19 S L5
      3131748 AD<19961030
          (AD<19961030)
L7      0 L6 AND AD<19961030

=> d l5 1-19 ibib abs

L5  ANSWER 1 OF 19  CAPLUS  COPYRIGHT 2010 ACS on STN
ACCESSION NUMBER: 2008:975888  CAPLUS
DOCUMENT NUMBER: 149:323968
TITLE: Effects of raloxifene therapy on circulating
osteoprotegerin and RANK ligand levels in post
-menopausal osteoporosis
AUTHOR(S): Fernandez-Garcia, D.; Munoz-Torres, M.; Mezquita-Raya,
P.; de la Higuera, M.; Alonso, G.; Reyes-Garcia, R.;
Ochoa, A. Sebastian; Ruiz-Requena, M. E.; Luna, J.
Dios; Escobar-Jimenez, F.
CORPORATE SOURCE: Bone Metabolic Unit, Endocrinology Division,
University Hospital San Cecilio Granada, RETICEF,
Spain
SOURCE: Journal of Endocrinological Investigation (2008),
31(5), 416-421
CODEN: JEIND7; ISSN: 0391-4097
```

PUBLISHER: Editrice Kurtis
DOCUMENT TYPE: Journal
LANGUAGE: English

AB Previous in vitro studies suggest that the anti-resorptive effect of raloxifene might be mediated by changes in several cytokines involved in the bone remodeling process. In this context, the osteoprotegerin (OPG)-receptor activator of NF κ B ligand (RANKL) system is considered a key component in the osteoclastogenesis regulation. The aim of this study was to determine the effects of raloxifene treatment on serum concns. of OPG, receptor RANKL and its relationship with biochem. markers of bone turnover and bone mineral d. (BMD) in previously untreated women with post-menopausal osteoporosis. We selected 47 post-menopausal women (mean age 63 \pm 7 yr) with densitometric criteria of osteoporosis. We determined at baseline, 3, 6, and 12 mo anthropometric parameters, biochem. markers of bone turnover, serum levels of 25(OH) D, serum levels of OPG and RANKL. BMD (dual-energy x-ray absorptiometry) in lumbar spine (LS) femoral neck and total hip was measured at baseline and 12 mo after raloxifene (60 mg /day) treatment. Serum levels of OPG decreased in the 3rd and 6th month of treatment (p<0.001) and returned to basal levels in the 12th month. There was a significant decrease of RANKL levels and OPG/RANKL ratio after 1 yr of raloxifene treatment. In addition, BMD in LS increased significantly (2.5%) in the 12th month of treatment (p=0.031). Finally, the biochem. markers of bone turnover (total alkaline phosphatase, bone alkaline phosphatase, osteocalcin, tartrate-resistant acid phosphatase, urine cross-linked carboxi-terminal telopeptide of type I collagen) decreased significantly from the 3rd month of treatment. In conclusion, our results support the hypothesis that raloxifene may inhibit osteoclast activity, at least partly modulating the OPG-RANKL system.

OS.CITING REF COUNT: 2 THERE ARE 2 CAPLUS RECORDS THAT CITE THIS RECORD (2 CITINGS)

REFERENCE COUNT: 24 THERE ARE 24 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 2 OF 19 CAPLUS COPYRIGHT 2010 ACS ON STN

ACCESSION NUMBER: 2007:1031812 CAPLUS

DOCUMENT NUMBER: 147:461903

TITLE: Effect of raloxifene-a selective oestrogen receptor modulator-on kidney function in post-menopausal women with Type 2 diabetes: results from a randomized, placebo-controlled pilot trial
AUTHOR(S): Hadjadj, S.; Gourdy, P.; Zaoui, P.; Guerci, B.; Roudaut, N.; Gautier, J. F.; Chabin, M.; Maucoc, G.; Ragot, S.

CORPORATE SOURCE: The RADIANT Raloxifene in Diabetic Nephropathy Study Group, Endocrinology, CHU Poitiers, Poitiers, Fr.
SOURCE: Diabetic Medicine (2007), 24(8), 906-910
CODEN: DIMEEV; ISSN: 0742-3071

PUBLISHER: Blackwell Publishing Ltd.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Aims: Epidemiol. and exptl. data suggest that activation of the estrogen receptor pathway limits the incidence and the progression of diabetic nephropathy. We tested the hypothesis that raloxifene protects against increasing urinary albumin excretion in post-menopausal women with Type 2 diabetes in a randomized pilot clin. trial. Methods: We included 39 post-menopausal women with Type 2 diabetes and micro- or macro-albuminuria in a 6-mo, double-blind, placebo-controlled trial: 20 received placebo and 19 received 60 mg raloxifene per day. The albumin: creatinine ratio (ACR) in urine was determined on three consecutive days during the week before

randomization and during the week before the final visit. Results: One patient in each group dropped out in the first 3 wk, leaving 37 patients for the anal. (19 on placebo and 18 on raloxifene). From randomization to the final visit, mean ACR was unchanged in the placebo group {277 µg/mg (67; 651) [median (interquartile range)] vs. 284 µg/mg (79; 1508)} but decreased slightly in the raloxifene group [376 µg/mg (67; 615) vs. 243 µg/mg (103; 549)]. This corresponds to a change of +24 (-37; +517) for the placebo group vs. -10 µg/mg (-36; +16) for the raloxifene group (P = 0.11). In multivariate anal., raloxifene treatment (Padjusted = 0.013), baseline low-d. lipoprotein (LDL) cholesterol (Padjusted = 0.023) and change in LDL cholesterol (Padjusted = 0.008) were related to the absolute change in ACR. Adverse effects were similar in the two groups. Conclusions: These results suggest that raloxifene may limit the progression of albuminuria in post-menopausal women with diabetes; further studies in a larger population are warranted.

OS.CITING REF COUNT: 1 THERE ARE 1 CAPLUS RECORDS THAT CITE THIS RECORD
(1 CITINGS)
REFERENCE COUNT: 20 THERE ARE 20 CITED REFERENCES AVAILABLE FOR THIS
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L5 ANSWER 3 OF 19 CAPLUS COPYRIGHT 2010 ACS ON STN

ACCESSION NUMBER: 2007:632156 CAPLUS

DOCUMENT NUMBER: 147:269408

TITLE: Differential effects of conventional and low dose oral hormone therapy (HT), tibolone, and raloxifene on coagulation and fibrinolysis

AUTHOR(S): Ellertsen, Anette Loken; Sandvik, Leiv; Mowinckel, Marie Christine; Andersen, Trine Opstad; Qvistad, Erik; Sandset, Per Morten

CORPORATE SOURCE: Department of Hematology, Ulleval University Hospital Trust, Oslo, Norway

SOURCE: Thrombosis Research (2007), 120(3), 371-379

CODEN: THBRAA; ISSN: 0049-3848

PUBLISHER: Elsevier B.V.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Introduction: We have recently reported that different hormone regimens given to healthy post-menopausal women had markedly different effects on activation of coagulation. Low-dose hormone therapy (HT) and raloxifene, as opposed to conventional-dose HT and tibolone, were associated with no or minor activation of coagulation. The aim of this study was to elucidate the mechanism(s) for differences in coagulation activation by analyzing clotting and fibrinolytic factors and coagulation inhibitors. Materials and methods: 202 healthy women were randomly assigned to receive treatment for 12 wk with either low dose HT containing 1 mg 17β-estradiol + 0.5 mg norethisterone acetate (NETA) (n = 50), conventional dose HT containing 2 mg 17 β-estradiol and 1 mg NETA (n = 50), 2.5 mg tibolone (n = 51), or 60 mg raloxifene (n = 51) in an open-label design. Results: The conventional- and low-dose HT groups generally showed similar effects, i.e., redns. in both clotting factors and inhibitors, but the effects were markedly more pronounced in the conventional-dose HT group. Compared with the low-dose HT group those treated with tibolone showed more pronounced decreases in factor VII, less reduction of antithrombin and protein C and even increased levels in protein S and tissue factor pathway inhibitor. As opposed to the low-dose HT group the redns. in inhibitors in the raloxifene group were smaller. Moreover in those allocated to raloxifene reduced levels of fibrinogen were seen. Conclusions: Our study demonstrates that the different HT regimens and raloxifene exert differential effects on coagulation factors, inhibitors and fibrinolytic factors.

OS.CITING REF COUNT: 3 THERE ARE 3 CAPLUS RECORDS THAT CITE THIS RECORD
(3 CITINGS)

REFERENCE COUNT: 29 THERE ARE 29 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 4 OF 19 CAPLUS COPYRIGHT 2010 ACS ON STN

ACCESSION NUMBER: 2006:1195935 CAPLUS

DOCUMENT NUMBER: 146:55407

TITLE: Effectiveness of raloxifene on bone mineral density and serum lipid levels in post-menopausal women with low BMD after

AUTHOR(S):

discontinuation of hormone replacement therapy
Song, E. K.; Yeom, J.-H.; Shin, H. T.; Kim, S. H.;
Shin, W. G.; Oh, J. M.

CORPORATE SOURCE:

Department of Pharmacy, Sejong General Hospital,
Sejong General Hospital, Seoul, S. Korea

SOURCE:

Journal of Clinical Pharmacy and Therapeutics (2006),
31(5), 421-427

CODEN: JCPTEJ; ISSN: 0269-4727

PUBLISHER:

Blackwell Publishing Ltd.

DOCUMENT TYPE:

Journal

LANGUAGE:

English

AB Objective: To evaluate the effect of raloxifene on bone mineral d. (BMD) and serum lipid levels in post-menopausal women who had discontinued hormone replacement therapy (HRT). Methods: Thirty-four post-menopausal women with low BMD who had taken 60 mg of raloxifene daily for 12 mo after discontinuing HRT were evaluated retrospectively. Information about their demographics, fracture history, BMD, lipid profiles and adverse events were collected from medical records and intranet database. The outcome measures were changes in the spine (L2-L4) and femur BMD, serum lipid concns., fracture rate and tolerability. Results: The post-menopausal women had a significant increase in their spine (L2-L4) and femur BMD from their baseline BMD [spine, $2.9 \pm 4.6\%$ ($P < 0.001$); femur, $3.0 \pm 6.6\%$ ($P = 0.01$)]. Serum low-d. lipoprotein (LDL) cholesterol was significantly reduced by 22.6% below baseline after 12 mo ($P = 0.007$). No fractures were observed during therapy. Raloxifene was well tolerated. The most common adverse event was hot flash, which was generally mild. Conclusions: Raloxifene increases BMD at important skeletal sites, and lowers LDL cholesterol with tolerable adverse events.

OS.CITING REF COUNT: 1 THERE ARE 1 CAPLUS RECORDS THAT CITE THIS RECORD (1 CITINGS)

REFERENCE COUNT: 28 THERE ARE 28 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 5 OF 19 CAPLUS COPYRIGHT 2010 ACS ON STN

ACCESSION NUMBER: 2006:73056 CAPLUS

DOCUMENT NUMBER: 144:480967

TITLE: Procoagulant state after raloxifene therapy in postmenopausal women

AUTHOR(S):

Azevedo, George Dantas; Franco, Rendrik Franca;
Baggio, Marcia Sueli; de Oliveira, Tecia Maria; Silva
de Sa, Marcos Felipe

CORPORATE SOURCE:

Faculty of Medicine of Ribeirao Preto, University of
Sao Paulo, Preto-SP, Brazil

SOURCE:

Fertility and Sterility (2005), 84(6), 1680-1684
CODEN: FESTAS; ISSN: 0015-0282

PUBLISHER:

Elsevier

DOCUMENT TYPE:

Journal

LANGUAGE:

English

AB Objective: To investigate the effects of raloxifene on the hemostatic system in postmenopausal women. Design: A prospective longitudinal study. Setting: Outpatient clinic of the Faculty of Medicine of Ribeirao Preto, Brazil. Patient(s): Sixteen postmenopausal women aged 56.8 ± 5.9 years

(mean \pm SD). Intervention(s): Raloxifene hydrochloride (60 mg once daily) was administered orally for a period of 6 mo. Main Outcome Measure(s): Plasma activities of coagulation factors (II, V, VII, VIII, IX, X, XI, XII, and fibrinogen), prothrombin-derived fragment 1 + 2, and activated protein C (APC) sensitivity ratio were measured at baseline and after 1, 3, and 6 mo of treatment. Result(s): Factor VIII activity increased by 17.1% and 26.9% at 3 and 6 mo of treatment, resp., compared with baseline. Factor XI and FXII activities significantly increased by 10.9% and 43.1%, resp., after 6 mo compared with baseline. A significant reduction of APC sensitivity ratio also was observed after 6 mo of treatment. Conclusion(s): A procoagulant state characterized by increased factor VIII, XI, and XII plasma levels and by reduced APC sensitivity was observed after raloxifene therapy in post-menopausal women.

OS.CITING REF COUNT: 4 THERE ARE 4 CAPLUS RECORDS THAT CITE THIS RECORD
(4 CITINGS)
REFERENCE COUNT: 30 THERE ARE 30 CITED REFERENCES AVAILABLE FOR THIS
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L5 ANSWER 6 OF 19 CAPLUS COPYRIGHT 2010 ACS ON STN

ACCESSION NUMBER: 2005:1137306 CAPLUS

DOCUMENT NUMBER: 144:142956

TITLE: Effects of raloxifene on body fat distribution and
lipid profile in healthy post-
menopausal women

AUTHOR(S): Francucci, C. M.; Pantaleo, D.; Iori, N.; Camilletti,
A.; Massi, F.; Boscaro, M.

CORPORATE SOURCE: Division of Endocrinology, Department of Internal
Medicine, University of Ancona, Florence, Italy

SOURCE: Journal of Endocrinological Investigation (2005),
28(7), 623-631

CODEN: JEIND7; ISSN: 0391-4097

PUBLISHER: Editrice Kurtis s.r.l.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB The aim of our prospective, randomized, controlled and open-label clin.
study was to evaluate in healthy post-menopausal women
the effects of raloxifene (RLX) on body fat distribution and lipids, and
the correlations between these parameters. The fat distribution, by dual
energy X-ray absorptiometry, and lipids were evaluated at baseline and
after 1 yr in 50 post-menopausal women: 25 were
treated with RLX 60 mg/die, while 25 served as control
group (CG). After 1 yr, we observed in RLX-users a slight reduction of fat

mass
in trunk and central region and an increase in legs and, in relation to
CG, significantly lower values of adiposity in trunk and abdominal region
($p < 0.05$). At the same time, HDL-cholesterol (HDL-C) and apolipoprotein A1
(ApoA1) were significantly increased in relation to baseline values and CG
($p < 0.05$) and apolipoprotein B (ApoB), total cholesterol/HDL-C, LDL
cholesterol/HDL-C, and ApoB/ApoA1 ratios significantly decreased compared
to baseline values and CG ($p < 0.05$). No correlation was underlined among
lipids and regional fat distribution. These results highlight the pos.
effect of RLX on lipids and suggest, for the first time, that RLX promotes
the shift from android to gynoid fat distribution, and prevents the
uptrend of abdominal adiposity and body weight compared with untreated women.

OS.CITING REF COUNT: 2 THERE ARE 2 CAPLUS RECORDS THAT CITE THIS RECORD
(2 CITINGS)

REFERENCE COUNT: 55 THERE ARE 55 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 7 OF 19 CAPLUS COPYRIGHT 2010 ACS ON STN

ACCESSION NUMBER: 2005:326045 CAPLUS

DOCUMENT NUMBER: 143:364827

TITLE: Interleukin-18 (IL-18) and matrix metalloproteinase-9 (MMP-9) in post-menopausal osteoporosis

AUTHOR(S): Maugeri, D.; Mamazza, C.; Lo Giudice, F.; Puglisi, N.; Muscoso, E. G.; Rizzotto, M.; Testai, M.; Bennati, E.; Lentini, A.; Panebianco, P.

CORPORATE SOURCE: Department of Senescent, Urological and Neurourological Sciences, Cannizzaro Hospital, University of Catania, Catania, I-95126, Italy

SOURCE: Archives of Gerontology and Geriatrics (2005), 40(3), 299-305
CODEN: AGGEDL; ISSN: 0167-4943

PUBLISHER: Elsevier B.V.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB This survey covered 60 post-menopausal women with osteoporosis. The patients were divided into three equal groups, and each group was treated with one of the three so-called anti-resorptive drugs, namely alendronate (10 mg/day) risedronate (5 mg/day) and raloxifene (60 mg/day) for 12 mo. The Elisa technique was used to measure circulating IL-18 and MMP-9. Lumbar bone mineral d. (BMD) levels were determined by using dexta mineralometry (Lunar DPX) at baseline and after 12 mo of treatment. The results showed comparable responses of the patients treated with alendronate or risedronate, being a significant increase in BMD, an increase in circulating IL-18, and only slight modifications in circulating MMP-9 levels. After 12 mo of treatment with raloxifene, there were minimal, non-significant increases in BMD, slight modifications in IL-18 levels, and a significant reduction in circulating MMP-9 levels. The conclusions can be drawn that all three drugs, albeit through different mechanisms, can be considered valid treatments for post-menopausal osteoporosis. Although measurements of circulating IL-18 and MMP-9 levels allowed us to differentiate the effects of the three drugs used, as of today, they have no real role in the diagnosis and/or follow-up of osteoporosis.

OS.CITING REF COUNT: 2 THERE ARE 2 CAPLUS RECORDS THAT CITE THIS RECORD (2 CITINGS)

REFERENCE COUNT: 28 THERE ARE 28 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 8 OF 19 CAPLUS COPYRIGHT 2010 ACS ON STN

ACCESSION NUMBER: 2005:306235 CAPLUS

DOCUMENT NUMBER: 142:475747

TITLE: HMR 3339, a novel selective estrogen receptor modulator, reduces total cholesterol, low-density lipoprotein cholesterol, and homocysteine in healthy postmenopausal women

AUTHOR(S): Vogelvang, Tatjana E.; Mijatovic, Velja; Kenemans, Peter; Teerlink, Tom; van der Mooren, Marius J.

CORPORATE SOURCE: Department of Obstetrics and Gynecology, Univ. Med. Center, Amsterdam, 4444422, Neth.

SOURCE: Fertility and Sterility (2004), 82(6), 1540-1549
CODEN: FESTAS; ISSN: 0015-0282

PUBLISHER: Elsevier

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Objective: To investigate the short-term effects of HMR 3339 in comparison with raloxifene and placebo on cardiovascular risk factors. Design: A multicenter, randomized, placebo-controlled, double-blind, dose-ranging study. Setting: Gynecol. outpatient department. Patient(s): One hundred eighteen healthy nonhysterectomized postmenopausal women. Intervention(s): Participants received daily placebo (n = 22), 2.5 mg of HMR 3339 (n = 25), 10 mg of HMR 3339 (n = 24), 50 mg of HMR 3339 (n = 24),

or 60 mg of raloxifene (n = 23) for 12 wk followed by a 2-wk washout period. Main Outcome Measure(s): Blood concns. of lipids measured at baseline, and after 2, 4, 8, 12, and 14 wk, and of lipoprotein(a), homocysteine, and endothelin-1 measured at baseline, and after 4 and 12 wk. Result(s): After 12 wk of treatment with HMR 3339, compared with placebo, serum total cholesterol was reduced (10 mg of HMR 3339: -9.7%; 50 mg of HMR 3339: -15.2%), low-d. lipoprotein (LDL)-cholesterol (10 mg of HMR 3339: -10.8%; 50 mg of HMR 3339: -24.2%) and plasma homocysteine concns. (2.5 mg of HMR 3339: -3.9%; 10 mg of HMR 3339: -10.8%; 50 mg of HMR 3339: -13.8%), suggesting a dose-dependent effect of HMR 3339. These effects were already apparent after 2 wk of treatment for total cholesterol and LDL-cholesterol, and after 4 wk of treatment for homocysteine. After 12 wk, raloxifene, compared with placebo, significantly decreased total cholesterol (-10.5%), LDL-cholesterol (-15.0%), and triglycerides (-16.9%), but not homocysteine. High-d. lipoprotein-cholesterol, lipoprotein(a), and endothelin-1 showed no significant changes in any of the active treatment groups. Conclusion(s): HMR 3339 reduces total cholesterol, LDL-cholesterol, and homocysteine concns. in postmenopausal women.

OS.CITING REF COUNT: 12 THERE ARE 12 CAPLUS RECORDS THAT CITE THIS RECORD (12 CITINGS)
 REFERENCE COUNT: 29 THERE ARE 29 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 9 OF 19 CAPLUS COPYRIGHT 2010 ACS ON STN

ACCESSION NUMBER: 2004:265335 CAPLUS

DOCUMENT NUMBER: 141:325476

TITLE: Effects of a long-term treatment with raloxifene on insulin sensitivity in postmenopausal women
 AUTHOR(S): Lasco, A.; Gaudio, A.; Morabito, N.; Previti, M.; Mileto, A.; Frisina, N.; Cucinotta, D.

CORPORATE SOURCE: Department of Internal Medicine, University of Messina School of Medicine, Messina, 98100, Italy

SOURCE: Diabetologia (2004), 47(3), 571-574
 CODEN: DBTGJ; ISSN: 0012-186X

PUBLISHER: Springer-Verlag

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Aims/hypothesis: Our aim was to investigate the effect of long-term administration of raloxifene, a selective estrogen receptor modulator, on insulin sensitivity, glucose tolerance and plasma lipid concns. in a group of postmenopausal women. Methods: A total of 24 women with postmenopausal osteoporosis were consecutively enrolled and randomly assigned to take raloxifene, 60 mg/day for 12 mo or placebo. At baseline and after 6 and 12 mo, in each subject insulin sensitivity (M-index) was assessed by means of an euglycemic hyperinsulinemic clamp. Plasma concns. of total cholesterol, triglycerides and HDL-cholesterol were also measured and glucose tolerance was evaluated. Results: In the raloxifene-treated group, the M index decreased after 6 and 12 mo with respect to the placebo group (-21%, p=0.042 and -23%, p=0.018, resp.). Neither fasting plasma glucose nor glucose tolerance changed in the raloxifene-treated group, compared to the placebo group. Low d. lipoprotein cholesterol concns. decreased at 12 mo (-13%, p=0.047). Conclusion/interpretation: A long-term treatment with raloxifene in osteoporotic, otherwise healthy post-menopausal women can reduce insulin sensitivity without affecting glucose tolerance.

OS.CITING REF COUNT: 4 THERE ARE 4 CAPLUS RECORDS THAT CITE THIS RECORD (4 CITINGS)

REFERENCE COUNT: 10 THERE ARE 10 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 10 OF 19 CAPLUS COPYRIGHT 2010 ACS ON STN

ACCESSION NUMBER: 2004:812958 CAPLUS
 DOCUMENT NUMBER: 141:360840
 TITLE: Raloxifene and hormone replacement therapy increase arachidonic acid and docosahexaenoic acid levels in postmenopausal women
 AUTHOR(S): Giltay, Erik J.; Duschek, Erik J. J.; Katan, Martijn B.; Zock, Peter L.; Neele, Simone J.; Netelenbos, J. Coen
 CORPORATE SOURCE: Psychiatric Center GGZ Delfland, Delft, Neth.
 SOURCE: Journal of Endocrinology (2004), 182(3), 399-408
 CODEN: JOENAK; ISSN: 0022-0795
 PUBLISHER: Society for Endocrinology
 DOCUMENT TYPE: Journal
 LANGUAGE: English
 AB Estrogens may affect the essential n-6 and n-3 fatty acids arachidonic acid (AA; C20:4n-6) and docosahexaenoic acid (DHA; C22:6n-3). Therefore, we investigated the long-term effects of hormone replacement therapy and raloxifene, a selective estrogen-receptor modulator, in two randomized, double-blind, placebo-controlled studies. In study I, 95 healthy, non-hysterectomized, early post-menopausal women (age range 47-59 yr) received one of the following treatments: daily raloxifene 60 mg, daily raloxifene 150 mg, 0.625 mg conjugated equine estrogens (CEE) plus 2.5 mg medroxyprogesterone acetate (MPA), or placebo. In study II, 30 men (age range 60-69 yr) received daily 120 mg raloxifene or placebo. In study I, plasma cholesteryl ester fatty acids were measured at baseline and after 6, 12, and 24 mo in 83 (drop out rate 13%), 73 (23%), and 70 (25%) women, resp. In study II, fatty acids were measured at baseline and after 3 mo in 29 men (drop out rate 3%). In postmenopausal women, administration of 150 mg raloxifene increased AA by a mean of +6.1. Administration of CEE plus MPA increased AA by +14.1%. Mean changes in DHA were +22.1% and +14.9% resp., as compared with placebo. In men, 120 mg raloxifene for 3 mo did not significantly affect AA (-5.2%) or DHA (+4.0%), but it increased testosterone levels by +19.8%. Administration of raloxifene 150 mg/day as well as CEE plus MPA to postmenopausal women increases the proportion of AA and DHA in plasma cholesteryl esters during a follow-up of 2 yr. Short term administration of raloxifene in elderly men did not affect AA or DHA. The synthesis of AA and DHA from precursors may be enhanced through an estrogen receptor-dependent pathway.
 OS.CITING REF COUNT: 18 THERE ARE 18 CAPLUS RECORDS THAT CITE THIS RECORD (18 CITINGS)
 REFERENCE COUNT: 49 THERE ARE 49 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
 L5 ANSWER 11 OF 19 CAPLUS COPYRIGHT 2010 ACS on STN
 ACCESSION NUMBER: 2004:621935 CAPLUS
 DOCUMENT NUMBER: 142:69114
 TITLE: Verapipride administered in combination with raloxifene decreases hot flushes and improves bone density in early postmenopausal women
 AUTHOR(S): Morgante, G.; Farina, M.; Cianci, A.; La Marca, A.; Petraglia, F.; Leo, V. De
 CORPORATE SOURCE: Department of Pediatrics, Obstetrics and Reproductive Medicine, Department of Obstetrics and Gynecology, University of Siena, Siena, Italy
 SOURCE: Gynecological Endocrinology (2004), 18(4), 194-198
 CODEN: GYENER; ISSN: 0951-3590
 PUBLISHER: Taylor & Francis Ltd.
 DOCUMENT TYPE: Journal
 LANGUAGE: English
 AB We evaluated the administration of raloxifene and verapipride in postmenopausal women with high osteoporosis risk and hot flushes in whom

hormone replacement therapy (HRT) was contraindicated. A group of early postmenopausal women (n = 29) (mean age 51.8 ± 4.1), complaining of severe vasomotor symptoms and with a bone mineral d. (BMD) T-score between -1.5 and -2.5 were evaluated. They were randomly assigned to two treatment groups: raloxifene (60 mg/day) continuously in association with veralipride (100 mg/day) on alternate days (n = 17); or on alternate months (n = 12). BMD, serum prolactin concentration and endometrial thickness were assessed at baseline and after 6 mo of therapy. Kupperman Index and hot flushes were assessed before and after 3 and 6 mo of therapy. BMD was significantly higher at the end of therapy with an increase of 1.1%. Kupperman Index was significantly reduced after 3 mo and a further decrease at 6 mo was observed with both protocols. Both treatments led to a significant reduction of hot flushes after 3 and 6 mo. No significant changes of prolactin levels were observed in either protocol. We found that the combined raloxifene-veralipride treatment, both every other day and every other month, led to a significant improvement in bone d. and was effective in hot flushes and other menopause-associated symptoms. These protocols could represent a new way to administer raloxifene in early postmenopausal women at high osteoporosis risk with HRT contraindication.

OS.CITING REF COUNT: 1 THERE ARE 1 CAPLUS RECORDS THAT CITE THIS RECORD
(1 CITINGS)
REFERENCE COUNT: 16 THERE ARE 16 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 12 OF 19 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2004:521260 CAPLUS

DOCUMENT NUMBER: 142:69101

TITLE: Effects of raloxifene on mood, sleep, libido and cognitive function in postmenopausal healthy women: a pilot study

AUTHOR(S): Natale, Vincenzo; Albertazzi, Paola; Missiroli, Natalie; Pedrini, Daniela; Salgarello, Matteo

CORPORATE SOURCE: Department of Psychology, University of Bologna, Bologna, Italy

SOURCE: Maturitas (2004), 48(1), 59-63

CODEN: MATUDK; ISSN: 0378-5122

PUBLISHER: Elsevier Ltd.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB Objective: To assess the effect of raloxifene (60 mg) on psychol. functions. Material and methods: A total of 49 women were enrolled in a 3-mo case-control study. Psychol. testing was performed at baseline and at the end of 3 mo of treatment. On both occasion measurements were repeated twice at 1 wk apart. Scores were averaged. Results: Raloxifene appeared to adversely affect the performance in the letter search test hence to worsen attention (t19=3.55, P=0.002) but it reduced wakening episodes compared with baseline (t19=3.33, P=0.005). Memory improved compared with baseline both in the raloxifene group (t19=2.99, P=0.008) and in the controls (t19=4.64, P=0.003). No significant differences were found in mood, well-being and indexes of sexual activity. Conclusion: Raloxifene does not appear to adversely affect psychol. function such libido, mood and memory. It may worsen attention but it reduces wakening episodes so it may thus improve sleep.

OS.CITING REF COUNT: 5 THERE ARE 5 CAPLUS RECORDS THAT CITE THIS RECORD
(5 CITINGS)
REFERENCE COUNT: 21 THERE ARE 21 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 13 OF 19 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2003:367776 CAPLUS

DOCUMENT NUMBER: 139:17367

TITLE: Endothelial function and menopause: Effects of

AUTHOR(S): raloxifene administration
 Colacurci, Nicola; Manzella, Daniela; Fornaro, Felice;
 CORPORATE SOURCE: Carbone, Marco; Paolisso, Giuseppe
 Departments of Gynecology and Obstetrics, Second
 SOURCE: University of Naples, Naples, I-80138, Italy
 Journal of Clinical Endocrinology and Metabolism
 (2003), 88(5), 2135-2140
 CODEN: JCEMAZ; ISSN: 0021-972X
 PUBLISHER: Endocrine Society
 DOCUMENT TYPE: Journal
 LANGUAGE: English
 AB Postmenopausal women have more severe endothelial dysfunction than
 premenopausal women. In the present study, we evaluated the possible
 beneficial effect of raloxifene administration, a selective estrogen
 receptor modulator, on endothelial regulation in postmenopausal women. In
 a double-blind, randomized vs. placebo trial, 60 healthy post-
 menopausal women were treated with raloxifene (60
 mg/d) or placebo for 4 mo to evaluate the effect of raloxifene
 treatment on endothelial function. Furthermore, in raloxifene-treated
 subjects (n = 30), the effect of raloxifene was also assessed during the
 intraarterial infusion of NG-monomethyl-L-arginine (4 μ mol/min).
 Raloxifene administration vs. placebo was associated with a decrease in
 plasma low-d. lipoprotein cholesterol (P < 0.01), triglyceride (P < 0.05),
 thiobarbituric acid-reactive substance (P < 0.01), vascular cell adhesion
 mol.-1 (P < 0.05), intracellular adhesion mol.-1 (P < 0.001), and
 E-selectin (P < 0.001) levels and with an increase in plasma Trolox equivalent
 antioxidant capacity (P < 0.001) levels. Indeed, raloxifene treatment was
 also associated with a significant improvement in endothelial-dependent
 vasodilatation assessed by brachial reactivity technique. Raloxifene
 administration had no impact on endothelial-independent vasodilatation.
 Furthermore, intraarterial infusion of NG-monomethyl-L-arginine inhibited
 the significant effect of raloxifene on endothelium-mediated brachial
 arterial diameter and flow. In conclusion, our results demonstrate that
 raloxifene administration is associated with a pos. modulation of
 endothelial-dependent vasodilatation likely due to a reduction of risk factors
 for endothelial damage.
 OS.CITING REF COUNT: 30 THERE ARE 30 CAPLUS RECORDS THAT CITE THIS
 RECORD (30 CITINGS)
 REFERENCE COUNT: 39 THERE ARE 39 CITED REFERENCES AVAILABLE FOR THIS
 RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT
 L5 ANSWER 14 OF 19 CAPLUS COPYRIGHT 2010 ACS on STN
 ACCESSION NUMBER: 2003:321168 CAPLUS
 DOCUMENT NUMBER: 139:46857
 TITLE: Raloxifene lowers IGF-I levels in acromegalic women
 AUTHOR(S): Attanasio, Roberto; Barausse, Michela; Cozzi, Renato
 CORPORATE SOURCE: Division of Endocrinology, Ospedale Niguarda, Milan,
 Italy
 SOURCE: European Journal of Endocrinology (2003), 148(4),
 443-448
 CODEN: EJOEEP; ISSN: 0804-4643
 PUBLISHER: BioScientifica Ltd.
 DOCUMENT TYPE: Journal
 LANGUAGE: English
 AB Background: IGF-I suppression in acromegaly obtained by tamoxifen, a
 selective estrogen receptor modulator (SERM), prompted us to evaluate the
 effects of the administration of a newer SERM, raloxifene (RAL), devoid of
 estrogenic activity at uterine level, on GH/IGF-I levels in patients with
 this disease. Patients: Thirteen post-menopausal
 acromegalic women (aged 55-84 yr) with active acromegaly entered a
 prospective open pilot study of RAL treatment at 60 mg
 /day. Nine of the patients, who were resistant to somatostatin analog and

dopamine agonist treatment, were not undertaking therapy; the other four, who were partially sensitive to medical treatment, maintained treatment at the maximally effective dosages throughout the study. Results: IGF-I levels fell significantly from 444 (median, interquartile 393-590) $\mu\text{g/l}$ to 300 (216-608) $\mu\text{g/l}$ ($P = 0.0192$) after 1 mo of RAL administration and this fall remained stable up to the final evaluation at 541 mo from the start of RAL treatment (260 (187-410) $\mu\text{g/l}$). An IGF-I decrease greater than 30% of basal values was observed in 10 patients (mainly in patients with IGF-I levels lower than 600 $\mu\text{g/l}$) and normal values were reached in seven (54%). GH levels did not change (basal 6 (4.1-8) $\mu\text{g/l}$, final 5.5 (3.2-7.4) $\mu\text{g/l}$). The clin. picture improved in patients sensitive to RAL. RAL withdrawal was followed by the return of IGF-I levels to pretreatment values within 8 wk in all patients. Conclusions: RAL decreases IGF-I levels in most acromegalic women with mild or intermediate disease (i.e. with values lower than 600 $\mu\text{g/l}$) and normalizes it in many. A prospective randomized study in patients resistant or partially sensitive to other medical treatments is warranted.

OS.CITING REF COUNT: 11 THERE ARE 11 CAPLUS RECORDS THAT CITE THIS RECORD (11 CITINGS)
 REFERENCE COUNT: 43 THERE ARE 43 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 15 OF 19 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2003:66525 CAPLUS

DOCUMENT NUMBER: 139:224349

TITLE: Raloxifene administration in post-menopausal women with osteoporosis: effect of different BsmI vitamin D receptor genotypes

AUTHOR(S): Palomba, Stefano; Numis, Fabio Giuliano; Mossetti, Giuseppe; Rendina, Domenico; Vuotto, Pietro; Russo, Tiziana; Zullo, Fulvio; Nappi, Carmine; Nunziata, Vincenzo

CORPORATE SOURCE: Department of Obstetrics & Gynaecology, University of Catanzaro, Catanzaro, Italy

SOURCE: Human Reproduction (2003), 18(1), 192-198

CODEN: HUREEE; ISSN: 0268-1161

PUBLISHER: Oxford University Press

DOCUMENT TYPE: Journal

LANGUAGE: English

AB BACKGROUND: The vitamin D receptor (VDR) gene polymorphism has been considered a factor influencing the effectiveness of the anti-osteoporotic treatments. The aim of this study was to correlate the effectiveness of raloxifene treatment in postmenopausal women with osteoporosis to BsmI VDR genotypes. METHODS: Between Jan. and August 2000, 75 Italian osteoporotic women were enrolled and treated with raloxifene at a dose of 60 mg/day. At entry and after 1 yr of treatment, lumbar bone mineral d. (BMD), serum osteocalcin (OC) and urinary creatinine-corrected free deoxyypyridinoline (DPD) levels were evaluated. DNA was extracted from blood and analyzed with restriction endonuclease BsmI for VDR gene. RESULTS: After treatment, a significant increase in lumbar BMD and a significant reduction in serum OC and urinary DPD levels were observed. The percentage of change (mean) in lumbar BMD, and in serum OC and urinary DPD levels was significantly different in homozygous bb (1.58, -5.15 and -7.71 for BMD, OC and DPD resp.) in comparison with BB (4.13, -13.59 and -15.16 for BMD, OC and DPD resp.) BsmI VDR genotypes. Heterozygous Bb VDR patients showed an intermediate percentage (mean) of BMD, serum OC and urinary DPD change (2.49, -8.69 and -10.52 for BMD, OC and DPD, resp.) not significantly different in comparison with homozygous BB and bb. CONCLUSIONS: In postmenopausal women with osteoporosis the effectiveness of raloxifene treatment on bone metabolism seems to be controlled by different BsmI VDR genotypes.

OS.CITING REF COUNT: 21 THERE ARE 21 CAPLUS RECORDS THAT CITE THIS

RECORD (21 CITINGS)
REFERENCE COUNT: 44 THERE ARE 44 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 16 OF 19 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2003:51259 CAPLUS

DOCUMENT NUMBER: 138:101132

TITLE: Effectiveness of combined GnRH analogue plus
raloxifene administration in the treatment of uterine
leiomyomas: a prospective, randomized, single-blind,
placebo-controlled clinical trial

AUTHOR(S): Palomba, Stefano; Russo, Tiziana; Orio, Francesco,
Jr.; Tauchmanova, Libuse; Zupi, Errico; Panici, Pier
Luigi Benedetti; Nappi, Carmine; Colao, Annamaria;
Lombardi, Gaetano; Zullo, Fulvio

CORPORATE SOURCE: Department of Obstetrics & Gynecology, University
'Magna Graecia' of Catanzaro, Catanzaro, Italy

SOURCE: Human Reproduction (2002), 17(12), 3213-3219

CODEN: HUREEE; ISSN: 0268-1161

PUBLISHER: Oxford University Press

DOCUMENT TYPE: Journal

LANGUAGE: English

AB BACKGROUND: Raloxifene hydrochloride is a synthetic non-steroidal drug
used for the prevention and treatment of post-menopausal
osteoporosis. Pre-clin. and clin. data have shown that raloxifene may
have a beneficial effect on leiomyomas. The aim of this prospective
single-blind, randomized, placebo-controlled clin. trial was to evaluate
the effectiveness of the addition of raloxifene to GnRH analogs on uterine,
leiomyoma, and non-leiomyoma sizes, and on the occurrence of
leiomyoma-related symptoms. METHODS: After randomization using a
computer-generated list, 100 pre-menopausal women with symptomatic uterine
leiomyomas received either leuprolide acetate depot plus raloxifene
60 mg daily (group A) or leuprolide plus placebo tablet
(group B) for six cycles of 28 days. At baseline and after treatment,
uterine, leiomyoma and non-leiomyoma sizes, and leiomyoma-related symptoms
were evaluated for each woman. Anal. was by intention-to-treat method.
RESULTS: After six cycles of treatment, a significant decrease in uterine,
leiomyoma, and non-leiomyoma sizes was detected in both groups in
comparison with baseline. At the same time, no significant difference in
uterine and non-leiomyoma sizes was observed between the groups. Leiomyoma
sizes were significantly ($P < 0.05$) lower in group A than in group B. No
difference was observed in leiomyoma-related symptoms between groups
throughout the study period. CONCLUSIONS: In women treated with GnRH
analog, the raloxifene administration induces a higher reduction of leiomyoma
sizes.

OS.CITING REF COUNT: 18 THERE ARE 18 CAPLUS RECORDS THAT CITE THIS
RECORD (18 CITINGS)

REFERENCE COUNT: 48 THERE ARE 48 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 17 OF 19 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2002:599202 CAPLUS

DOCUMENT NUMBER: 138:231664

TITLE: The hemorheological effects of raloxifene in
postmenopausal women with osteoporosis. Results of a
3-year placebo-controlled clinical trial

AUTHOR(S): Shand, Brett; Gilchrist, Nigel; Blackwell, Terri;
March, Rachel

CORPORATE SOURCE: Lipid and Diabetes Research Group, Christchurch
Hospital, Christchurch, N. Z.

SOURCE: Clinical Hemorheology and Microcirculation (2002),
26(4), 249-255

CODEN: CHMIFQ; ISSN: 1386-0291

PUBLISHER: IOS Press
DOCUMENT TYPE: Journal
LANGUAGE: English

AB Raloxifene, the prototype of the selective estrogen receptor modulators, has been associated with an increased risk of venous thromboembolism. As hemorheol. factors may be involved in thrombus formation this placebo-controlled study investigated whether raloxifene was associated with changes in determinants of blood viscosity. Fifty-seven post-menopausal women were randomly assigned to receive placebo, raloxifene 60 mg/day, or raloxifene 120 mg/day for 36 mo. Venous blood samples were collected at baseline and at 12-monthly intervals and used to measure hematocrit, whole blood and plasma viscosity and plasma fibrinogen concentration. Time- and treatment-related changes in the grouped and pooled data was analyzed using ANOVA with repeated measures and correlation matrices. The mean values of all the hemorheol. indexes showed small inconsistent changes within the normal reference range over the 36-mo period of the study. There was a small but significant decrease over time in high shear rate blood viscosity and plasma viscosity in raloxifene-treated subjects compared to those receiving placebo ($p < 0.05$). Correlation analyses showed the anticipated relationships between blood viscosity and hematocrit and plasma viscosity levels and also between plasma viscosity and plasma fibrinogen concentration. No subject developed a thromboembolic vascular event during the study. These results show that compared with placebo treated-subjects, long-term raloxifene treatment in post-menopausal women, at a dose of either 60 or 120 mg daily, was not associated with adverse changes in hemorheol. factors that may contribute to venous thromboembolism.

OS.CITING REF COUNT: 1 THERE ARE 1 CAPLUS RECORDS THAT CITE THIS RECORD (1 CITINGS)

REFERENCE COUNT: 19 THERE ARE 19 CITED REFERENCES AVAILABLE FOR THIS RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 18 OF 19 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 2001:466324 CAPLUS

DOCUMENT NUMBER: 135:267178

TITLE: Effects of the selective estrogen receptor modulator-raloxifene-on calcium and PTH secretory dynamics in women with osteoporosis

AUTHOR(S): Oleksik, A.; Duong, T.; Popp-Snijders, C.; Pliester, N.; Asma, G.; Lips, P.

CORPORATE SOURCE: Department of Endocrinology, Vrije Universiteit, Amsterdam, Neth.

SOURCE: Clinical Endocrinology (Oxford, United Kingdom) (2001), 54(5), 575-582

CODEN: CLECAP; ISSN: 0300-0664

PUBLISHER: Blackwell Science Ltd.

DOCUMENT TYPE: Journal

LANGUAGE: English

AB A possible mechanism for the maintenance of bone mass by estrogens and the selective estrogen receptor modulator (SERM)-raloxifene-is an interaction with calciotropic hormones. We studied the effects of raloxifene on calcium-PTH homeostasis. Calcium and EDTA infusions were performed in 32 post-menopausal women with osteoporosis (BMD T score < -2.5). This cross-sectional study was performed in the third year of the MORE (Multiple Outcomes of Raloxifene Evaluation) trial, a double-blind, placebo-controlled study. After an overnight fast, calcium gluconate (5 mg/kg BW h), and after 2.5 h of test-free interval, Na3EDTA (40 mg/kg BWh) were given i.v. The duration of infusions was based on individual plasma total calcium before the calcium infusion ($t = 0$), the target calcium (2.60 and 1.95 mmol/L, resp.), and desired mean calcium change (0.010 mmol/L min). Blood samples were taken at 0 and every 5 min of both

infusions. Plasma PTH levels were fitted into an inversed sigmoidal relation with plasma calcium. The effect of raloxifene on calcium-PTH homeostasis was tested in linear regression models adjusted for age and BMI. Nine patients used placebo, 13 raloxifene 60 mg /day and 10 raloxifene 120 mg/day. Raloxifene use was associated with lower plasma albumin (40.7 ± 1.8 vs. 38.0 ± 2.0 and 38.5 ± 2.3 g/l, for placebo, raloxifene 60 mg/day and raloxifene 120 mg/day, resp., $P = 0.01$), lower plasma total calcium at $t = 0$ (2.28 vs. 2.24 and 2.21 ; ± 0.07 mmol/L; $P = 0.03$), lower plasma total calcium at 50% of maximal PTH secretion (PTH set-point: 2.23 ± 0.06 vs. 2.18 ± 0.07 and 2.16 ± 0.08 mmol/L, $P = 0.06$), and lower plasma non-suppressible PTH (0.84 ± 0.19 vs. 0.75 ± 0.10 and 0.73 ± 0.05 pmol/L, $P = 0.02$). After correction for plasma albumin, the differences for plasma calcium at $t = 0$ and at PTH set-point were no longer significant. In contrast, the difference in PTH suppression during calcium load was not explained either by differences in plasma albumin or calcium. Raloxifene did not have any detectable effect on the PTH set-point. An effect on non-suppressible PTH secretion cannot be excluded.

OS.CITING REF COUNT: 2 THERE ARE 2 CAPLUS RECORDS THAT CITE THIS RECORD
(2 CITINGS)
REFERENCE COUNT: 44 THERE ARE 44 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

L5 ANSWER 19 OF 19 CAPLUS COPYRIGHT 2010 ACS on STN

ACCESSION NUMBER: 1999:147803 CAPLUS

DOCUMENT NUMBER: 130:173033

TITLE: Benzo(b)thiophene derivatives for preventing headaches

INVENTOR(S): Lakshmanan, Mark Chandrakant

PATENT ASSIGNEE(S): Eli Lilly and Company, USA

SOURCE: Eur. Pat. Appl., 7 pp.

CODEN: EPXXDW

DOCUMENT TYPE: Patent

LANGUAGE: English

FAMILY ACC. NUM. COUNT: 1

PATENT INFORMATION:

PATENT NO.	KIND	DATE	APPLICATION NO.	DATE
EP 897723	A1	19990224	EP 1998-306615	19980818
R: AT, BE, CH, DE, DK, ES, FR, GB, GR, IT, LI, LU, NL, SE, MC, PT, IE, SI, LT, LV, FI, RO				
US 6008232	A	19991228	US 1998-129072	19980804
CA 2300821	A1	19990225	CA 1998-2300821	19980817
WO 9908524	A1	19990225	WO 1998-US16996	19980817
W: AL, AM, AU, AZ, BA, BB, BG, BR, BY, CA, CN, CU, CZ, EE, GE, GH, GM, HR, HU, ID, IL, IS, JP, KE, KG, KP, KR, KZ, LC, LK, LR, LS, LT, LV, MD, MG, MK, MN, MW, MX, NO, NZ, PL, RO, RU, SD, SG, SI, SK, SL, TJ, TM, TR, TT, UA, UG, US, UZ, VN, YU, ZW				
RW: GH, GM, KE, LS, MW, SD, SZ, UG, ZW, BF, BJ, CF, CG, CI, CM, GA, GN, GW, ML, MR, NE, SN, TD, TG				
AU 9889096	A	19990308	AU 1998-89096	19980817
ZA 9807390	A	20000403	ZA 1998-7390	19980817
JP 2001515014	T	20010918	JP 2000-509284	19980817
PRIORITY APPLN. INFO.:			US 1997-56747P	P 19970820
			WO 1998-US16996	P 19980817

ASSIGNMENT HISTORY FOR US PATENT AVAILABLE IN LSUS DISPLAY FORMAT

OTHER SOURCE(S): MARPAT 130:173033

AB Disclosed is the use of a [6-hydroxy-2-(4-hydroxyphenyl)benzo[b]thien-3-yl][4-(2-ethoxyphenyl)methanone derivative or a pharmaceutically acceptable salt or solvate thereof, in the preparation of a medicament useful for preventing headaches in a post-menopausal woman.

Post-menopausal women received a 60 mg
tablet of raloxifene·HCl once a day; 10.5 % of women reported
suffering from headache, whereas 15.9 % of the placebo-treated patients
complained of headaches.

REFERENCE COUNT: 2 THERE ARE 2 CITED REFERENCES AVAILABLE FOR THIS
RECORD. ALL CITATIONS AVAILABLE IN THE RE FORMAT

=> d his

(FILE 'HOME' ENTERED AT 14:42:33 ON 04 MAY 2010)

FILE 'REGISTRY' ENTERED AT 14:42:46 ON 04 MAY 2010

L1 22 S RALOXIFENE

FILE 'CAPLUS' ENTERED AT 14:42:55 ON 04 MAY 2010

L2 2666 S L1

L3 78 S L2 AND POST-MENOPAUSAL

L4 19 S L3 AND (60) (A) (MG)

L5 19 DUP REM L4 (0 DUPLICATES REMOVED)

L6 19 S L5

L7 0 S L5 AND AD<19961030

=>

---Logging off of STN---

=>

Executing the logoff script...

=> LOG Y

COST IN U.S. DOLLARS

SINCE FILE

TOTAL

ENTRY

SESSION

FULL ESTIMATED COST

73.95

80.16

DISCOUNT AMOUNTS (FOR QUALIFYING ACCOUNTS)

SINCE FILE

TOTAL

ENTRY

SESSION

CA SUBSCRIBER PRICE

-16.15

-16.15

STN INTERNATIONAL LOGOFF AT 14:47:17 ON 04 MAY 2010